

JUN 23 2008

NEW CUSTOMER ID / OUTLET ID: 2720050-1 OLD OUTLET DESIGNATION:

[illegible]

in

PVSC FORM MR-2 REV.3 6/93

COMPLETE ANALYSIS LABORATORIES INC.



NJDEP Certified Laboratory No. 14964

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Amneal Pharmaceutical Corp.
209 McLean Blvd.
Paterson, NJ 07054

1259 Route 46, Building #4/C
Parsippany, NJ 07054-4909

ANALYSIS REPORT

REPORT DATE: MAY 22, 2008PROJECT NO : 813496LAB ID NO: 813496.1FIELD ID NO: AP-0506Sample: Liquid, Sampled by CALI on 5/6/08

Parameter	Method No	Result (mg/L)	Analysis		RLs (mg/L)	DF
			Date	Time		
BOD ₅	405.1	27.0	5/7/08	8:48	2.0	1
TSS	160.2	6.40	5/9/08	8:00	4.0	1

Definitions:

pH Unit, J= Compound Detected but Below MDL, RLs= Laboratory Reporting Limits,

MDL= Method Detection Limit, DF= Dilution Factor, ND = Not Detected

RL = MDL x DF

Approved By:

Zvi Blank, Ph.D., CHMM
Laboratory Director

AMNEAL

P h a r m a c e u t i c a l s

METHOD USED

TOTAL WATER USED

$6,773.9 (5/31/08) - 6,508.2 (5/1/08) = 125 \text{ CF1} \times 7.48 \times 100 = 93,276/22 \text{ DAYS} = 4,240 \text{ Total Flow - Gal/Day.}$

SANITARY USED

$1,325 (5/31/08) - 1,278 (5/1/08) = 47 \times 7.48 \times 100 = 35,156/22 \text{ DAYS} = 1,598 \text{ Flow - Gal/Day.}$

$$\text{REGULATORY/TOTAL} = 2,642/4,240 = 0.6$$

SITE PLAN: NO CHANGE



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CHAIN OF CUSTODY

COMPLETE ANALYSIS LABORATORIES, INC.

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 NJDEP LAB CERTIFICATION # 14964

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 (Lab use only) No. 215496

DELIVERABLES: ☒ STD ☐ REDUCED ☐ FULL
 (CIRCLE ONE) OTHER (Specify) _____

CLIENT	AMNEAL PHARMACEUTICAL		
ADDRESS	209 MCLEAN BLVD.		
CITY	PATERSON		
STATE	NJ	ZIP	07054

CONTACT	DR. ZIRVI	PHONE	(973) 357-0222
PROJECT	WASTEWATER		
SAMPLER	name <u>G. Hume</u>	sign	<u>[Signature]</u>
WITNESSED BY	name _____		

LAB ID	FIELD ID	SAMPLING DATE/TIME	M	T	No	P	ANALYSIS
813496.1	AP- 0506	5/6/02 12:35	A	C	1	C	BOD, TSS
813496.1	AP- 0506	5/6/02 12:35	A	C	1	Hn, C	Cu, Zn, Pb,
813496.2	AP- 0506 G	5/6/02 12:45 6.47	A	G	2	H, C	VOC*
REMARKS		* VOC TO INCLUDES: ACETONE, METHYLENE CHLORIDE					
		COMPOSITE SAMPLER WAS SET UP ON 5/5/02 @ 12:00				SAMPLE WAS COLLECTED ON 5/6/02 @ 12:45	
		SAMPLING FREQUENCY - 30 MINUTES.				monthly	

RELINQUISHED BY		RECEIVED BY		DATE	TIME	METHOD OF RELINQUISH.	RECEIVING ORGANIZATION
NAME	SIGNATURE	NAME	SIGNATURE				
G. Hume	<u>[Signature]</u>	W. H. [Signature]	<u>[Signature]</u>	5/6/02	12:40	ANAL. [Signature] orig. off	05/15
TURNAROUND TIME:				PRIORITY AUTHORIZATION:			
M = MATRIX	A - AQUEOUS SL-SLUDGE	P - POTABLE WATER SO - SOLID	S - SOIL X - OTHER	O - OIL			
T = TYPE	C - COMPOSITE	G - GRAB	No. = NUMBER OF CONTAINERS				
P = PRESERVATIVE	H ₂ - H ₂ SO ₄	Hn - HNO ₃	H - HCl	N - NaOH	A - ASCORBIC ACID	C - COOL TO 4 °C	

SC-010 REV 4/96

FOR REGULATORY COMPLIANCE